

## PURCHASER SURVIVOR AUTHORIZATION

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- A contract Purchaser may designate one person to succeed (him/her) as Purchaser in the event of death. If none is designated, the Student will become Purchaser.
- Complete all sections of this form and include signature or processing will be delayed.

### Current Contract Information

GET Contract Number \_\_\_\_\_

Purchaser \_\_\_\_\_

Name \_\_\_\_\_

SSN or TIN \_\_\_\_\_

Student \_\_\_\_\_

Name \_\_\_\_\_

SSN or TIN \_\_\_\_\_

### Purchaser Survivor Information

Name (*First, middle, last, suffix*) \_\_\_\_\_

SSN or TIN \_\_\_\_\_

Birth Date \_\_\_\_\_

Street Address / Apartment Number \_\_\_\_\_

Post Office Box Number \_\_\_\_\_

City / State / Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone Number (s) \_\_\_\_\_

Home

Work

### Signature - REQUIRED

Only the contract Purchaser may authorize changes to the existing contract.

*In the event of my death, I desire to transfer all my contract's Guaranteed Education Tuition Master Agreement rights and responsibilities to the Purchaser Survivor designated above.*

Purchaser's Signature \_\_\_\_\_

Date \_\_\_\_\_